

10/527672
Serial No
TBA

Sheet 1 of 1

Group: TBA

| Examiner Initial | Patent No. | Date | Name | Class | Subclass | Filing Date (if appropriate) |
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| Examiner Initial | Document No. | Date | Country | Class | Subclass | Translation | |
|------------------|----------------|-------------|---------|-------|----------|-------------|----|
| | | | | | | YES | NO |
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.